

Docket No.: 0933-0238PUS1

(PATENT)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

	Patent Application of: /ALTANEN et al.	
Appli	cation No.: 10/528,989	Confirmation No.: 6375
Filed:	March 24, 2005	Art Unit: 1654
For:	METHOD FOR DESIGNING PEPTIDES	Examiner: Audet, M.
	RESPONSE TO NOTICE TO FILE MISSING	PARTS OF APPLICATION
Comn P.O. E	Tissing Parts hissioner for Patents Box 1450 hdria, VA 22313-1450	
Sir:		
Applio	In response to the Notice to File Missing Part cant respectfully submits:	es of Application dated July 12, 2007,
\boxtimes	Attached is a copy of the Notice to File Missing Pa	arts of Non-provisional Application.
	Under the provisions of 37 C.F.R. §§ 1.41(c) and Declaration of the inventor(s) (∑ original ☐ phofiling requirements in connection with the above-ion	otocopy), necessary for completing the
	Under the provisions of 37 C.F.R. §§ 1.41(c) and Declaration that was attached to the specification specification is a true copy of the specification Trademark office on United States of America, applicable) filed on even date therewith.	at the time of execution. The attached that was filed in the U.S. Patent and

Attached is a Petition for Extension of Time.

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Submitted concurrently herewith under separate cover for recording is an Assignment.

Application No.: 10/528,989 Docket No.: 0933-0238PUS1

Attached hereto is the fee transmittal listing the required fees.

If necessary, the Commissioner is hereby authorized in this, concurrent, and future replies, to charge payment or credit any overpayment to our Deposit Account No. 02-2448 for any additional fees required under 37 C.F.R. § 1.16 or under § 1.17; particularly, extension of time fees.

Dated:

JUL 2 5 2007

Respectfully submitted,

Gerald M. Murphy

Registration No.: 28,977

BIRCH, STEWART, KOLASCH & BIRCH, LLP

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Falls Church, Virginia 22040-0747

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Attorney for Applicant

Attachment(s)



Under the Paperwork Reduction Act of	1995, no person are required to	U.S. Patent and Trad	PTO/SB/17 (07-07) proved for use through 06/30/2010. OMB 0651-0032 lemark Office; U.S. DEPARTMENT OF COMMERCE nation unless it displays a valid OMB control number.							
Effective on 12/08/	2004.	Complete if Known								
Fees pursuant to the Consolidated Approp	riations Act, 2005 (H.R. 4818).	Application Number	10/528,989							
FEE TRANS	MITTAL	Filing Date	March 24, 2005							
For FY 20		First Named Inventor	Heli VALTANEN							
FOIFT ZU	107	Examiner Name	Audet, M.							
X Applicant claims small entity state	us. See 37 CFR 1.27	Art Unit	1654							
TOTAL AMOUNT OF PAYMENT	(\$) 60.00	Attorney Docket No.	0933-0238PUS1							
METHOD OF PAYMENT (check all that apply)										
Check Credit Card Money Order None Other (please identify):										
x Deposit Account Deposit Account Number: 02-2448 Deposit Account Name: Birch, Stewart, Kolasch & Birch,										
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)										
x Charge fee(s) indicated	below	Charge fee(s) indicated below, except for the filing fee								
Charge any additional f fee(s) under 37 CFR 1.	ee(s) or underpayments o 16 and 1.17	f x Credit any ove	rpayments							
FEE CALCULATION										

SEARCH FEES

Small Entity

Fee (\$)

250

50

150

250

0

EXAMINATION FEES

Fee (\$)

200

130

160

600

0

Small Entity

Fee (\$)

100

65

80

300

0

Fees Paid (\$)

Provisional

Application Type

Utility

Design

Reissue

Plant

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Fee (\$)

300

200

200

300

200

FILING FEES

Small Entity

Fee (\$)

150

100

100

150

100

2. EXCESS CLA	IM FEES										
Fee Description				<u>Fee (\$)</u>							
Each claim over 20 (including Reissues)											
Each independent claim over 3 (including Reissues)											
Multiple dependent claims											
Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims							

Fee (\$)

500

100

300

500

0

with the depende	chi Ciannis					300
Total Claims	Extra Claims	Fee (\$)		Fee Paid (\$)	Multiple De	pendent Claims
23:	23 =	x	=		Fee (\$)	Fee Paid (
HP = highest number	er of total claims paid f	or, if greater th	an 20.			
Indep. Claims	Extra Claims	Fee (\$)		Fee Paid (\$)		
3	3 =	x	=			
HP = highest number	er of independent clain	ns paid for, if gr	eater th	nan 3.		
3. APPLICATION	SIZE FEE					
If the specificati	ion and drawings	exceed 100:	sheets	of paper (excluding electr	onically filed sequen	ce or computer
				ize fee due is \$250 (\$125 f		

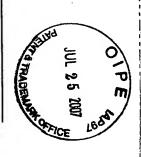
sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). **Total Sheets** Extra Sheets Number of each additional 50 or fraction thereof Fee - 100 = (round up to a whole number) x

4. OTHER FEE(S) Fees Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): 2251 Extension for response within first month 6

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SUBMITTED BY	$\Box II$	_		$\overline{}$				7						
Signature		. M	m	(W	1(χ			Registration No. (Attorney/Agent)	28,977	Telephon	e	(703) 2
Name (Print/Type)	g	eralq	М.	Nu	rphy, .	f .	II					Date	JU	2 3
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